

**DECLARATION AND POWER OF ATTORNEY
FOR PATENT APPLICATION**

Docket Number
13DV13763

As a below named inventor, I hereby declare that:

JUL 03 2002

My residence, post office address, and citizenship are as stated below next to my name:

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHODS AND SYSTEMS FOR MANAGING SUPPLY CHAIN PROCESSES

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the specification of which

is attached hereto
OR

was filed on 07/06/01 as United States Application Number or PCT International Application Number 09/900,737
and was amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119 (a)-(d) or §365 (b) of any foreign application(s) for patent or inventor's certificate, or §365 (a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

PRIOR FOREIGN APPLICATION(S)

Priority Claimed

(Number) (Country) (Day/Month/Year Filed)

Yes No

(Number) (Country) (Day/Month/Year Filed)

Yes No

Additional foreign application numbers are listed on a supplemental priority data sheet attached hereto.

I hereby claim the benefit under Title 35, United States Code §119 (e) of any United States provisional application(s) listed below.

Additional provisional application numbers are listed on a supplemental priority data sheet attached hereto.

(Application Number) (Filing Date)

I hereby claim the benefit under Title 35, United States Code §120 of any United States Application(s), or §365 (c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

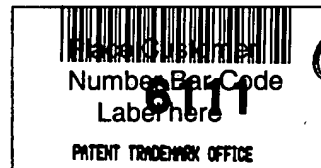
(Application Number) (Filing Date) (Status - patented, pending, abandoned)

(Application Number) (Filing Date) (Status - patented, pending, abandoned)

I hereby appoint the registered practitioners associated with Customer Number 006111 to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

Address all telephone calls to: WILLIAM SCOTT ANDES at telephone number (513) 243-5955

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ATTN: ANDREW C. HESS
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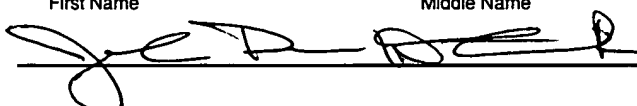


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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SOLE OR FIRST INVENTOR:

Full name: JOHN DAVID WHITENACK
First Name Middle Name Last Name

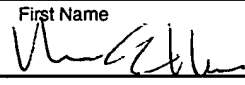
Signature:  Date 6-27-02

Residence: MASON, OH Citizenship: US
City and State

Post Office Address: 5820 LISA COURT, MASON, OH 45040

SECOND JOINT INVENTOR:

Full name: SHAWN ERIC HOLT
First Name Middle Name Last Name

Signature:  Date 4/26/02

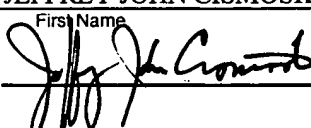
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City and State

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THIRD JOINT INVENTOR:

Full name: JEFFREY JOHN CISMOSKI
First Name Middle Name Last Name


Signature:  Date 5/15/02

Residence: LAKE GENEVA, WI Citizenship: US
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Post Office Address: P.O. BOX 964, LAKE GENEVA, WI 53147

FOURTH JOINT INVENTOR:

Full name: MARGO TEETZEL MOATS
First Name Middle Name Last Name

Signature:  Date 4/26/2002

Residence: CINCINNATI, OH Citizenship: US
City and State

Post Office Address: 5053 LORD ALFRED COURT, CINCINNATI, OH 45241

FIFTH JOINT INVENTOR:

Full name: MATTHEW DUANE KRESS
First Name Middle Name Last Name

Signature: Matthew Duane Kress Date 04-29-02

Residence: LEBANON, OH Citizenship: US
City and State

Post Office Address: 2889 WOOD RD., LEBANON, OH 45036

SIXTH JOINT INVENTOR:

Full name: FRANCIS GERARD STEPIC
First Name Middle Name Last Name

Signature: Francis Gerard Stepic Date 5/2/02

Residence: AMELIA, OH Citizenship: US
City and State

Post Office Address: 1386 LAUREL OAK DRIVE, AMELIA, OH 45102

SEVENTH JOINT INVENTOR:

Full name: PAUL EDWARD JOHNSON
First Name Middle Name Last Name

Signature: Paul E Johnson Date 6/7/02

Residence: WILDER, KENTUCKY Citizenship: US
City and State

Post Office Address: 13 BRIGADE COURT, WILDER, KY ~~41965~~ 41076

EIGHTH JOINT INVENTOR:

Full name: LANELL SCOT GRAY
First Name Middle Name Last Name


Signature: Janell Scot Gray Date 6/24/02

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Post Office Address: 25025 CHAMBLEY DRIVE, SOUTHFIELD, MI 48034

NINTH JOINT INVENTOR:

Full name: CRAIG LEONARD BROCKLEHURST
First Name Middle Name Last Name

Signature:  Date 9/26/02

Residence: CINCINNATI, OH Citizenship: US
City and State

Post Office Address: 2837 LINWOOD AVENUE, CINCINNATI, OH 45208

TENTH JOINT INVENTOR:

Full name: _____
First Name Middle Name Last Name

Signature: _____ Date _____

Residence: _____ Citizenship: _____
City and State

Post Office Address: _____

ELEVENTH JOINT INVENTOR:

Full name: _____
First Name Middle Name Last Name

Signature: _____ Date _____

Residence: _____ Citizenship: _____
City and State

Post Office Address: _____

TWELVTH JOINT INVENTOR:

Full name: _____
First Name Middle Name Last Name

Signature: _____ Date _____

Residence: _____ Citizenship: _____
City and State

Post Office Address: _____
